



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5662

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------|
| SERIAL NUMBER 10/518,869 | FILING OR 371(c) DATE 12/17/2004 RULE | CLASS 285 | GROUP ART UNIT 3679 | ATTORNEY DOCKET NO. 22188/06730 | |
| APPLICANTS Peter C. Williams, Cleveland Heights, OH; ** CONTINUING DATA ***** <i>MNM</i> This application is a 371 of PCT/US03/31021 09/18/2003 which claims benefit of 60/411,617 09/18/2002 ** FOREIGN APPLICATIONS ***** <i>None</i> | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Michael Williams</i> Examiner's Signature Initials | | STATE OR COUNTRY OH | SHEETS DRAWING 7 | TOTAL CLAIMS 29 | INDEPENDENT CLAIMS 4 |
| ADDRESS 24024 | | | | | |
| TITLE Tube fitting with tube gripping ring and sealant | | | | | |
| FILING FEE RECEIVED 1550 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |